Before the

FEDERAL COMMUNICATIONS COMMISSION
Washington, D.C. 20554

In the Matter of	**)**	
	)	
Reallocation of the 216–220 MHz,	**)**	**WT Docket No. 02-8**
1390–1395 MHz, 1427–1429 MHz,	**)**	**RM-9267**
1429–1432 MHz, 1432–1435 MHz,	**)**	**RM-9692**
1670–1675 MHz, and 2385–2390 MHz	**)**	**RM-9797**
Government Transfer Bands	**)**	**RM-9854**
	)	**RM-9882**

REPLY COMMENTS OF PHILIPS MEDICAL SYSTEMS

The Philips Medical Systems division of Philips Electronics North America Corp. ("Philips"), pursuant to Section 1.415 of the Commission's Rules, hereby files its reply comments on the *Notice of Proposed Rule Making*, released February 6, 2002, FCC 02-15 ("*Notice*") in the above-captioned proceeding. Philips is a leading manufacturer of patient monitoring devices that incorporate radios operating in the bands allocated to the Wireless Medical Telemetry Service ("WMTS") and is also a member of the American Hospital Association Task Force on Medical Telemetry.

This brief reply addresses several points concerning technical restrictions on and coordination of the 1392–1395/1432–1435 MHz paired bands necessary to protect patients and their healthcare providers who rely on WMTS in adjacent bands, as well as one point concerning secondary telemetry in WMTS-primary bands.

1. In its comments concerning band management in the 1392–1395/1432–1435 MHz paired bands, the United Telecom Council ("UTC") comments that "interference protections and coordination requirements adopted in the 700 MHz guard band for adjacent public safety users also appear unnecessary."[1] Philips strongly disagrees with this position. WMTS users adjacent to or close to these paired bands operate at much lower power than many of the 700 MHz public safety users to whom UTC refers; these WMTS users are even more susceptible to disabling interference. It is therefore all the more important that the Commission adopt appropriate technical service rules analogous to those in Part 27 of the Commission's Rules for the 1392–1395 and 1432–1435 MHz bands.[2] Examples of necessary restrictions on transmitter power to protect WMTS users are discussed in Philips' initial comments.[3] If the Commission adopts a band manager approach for these bands, the rules should provide for notification of the WMTS coordinator not only with respect to coordination issues,[4] but also in instances of harmful interference where even the Part 27 rules do not currently require notification.[5]

2. Both Philips and Spacelabs Medical submitted comments on out-of-band emissions from transmitters operating in the 1392–1395/1432–1435 MHz paired bands, and both supported the application of the 500 microvolt/m limit set forth in Section 15.209(a) of the Commission's Rules.[6] Philips wishes to clear up any confusion by pointing out that this regulation specifies that the measurement be performed at 3 m from the radiator (transmitter).[7]

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[1] *Comments of the United Telecom Council*, at 17 n.37.

[2] *Cf.* 47 C.F.R. § 27.2(b); *id.* Part 27, Subpart C. Philips does not support the licensing of band managers in the 1392–1395/1432–1435 MHz paired bands. *Initial Comments of Philips Medical Systems,* at 6. If the Commission nonetheless adopts its band manager proposal, it should adopt rules at least as protective as those in Part 27. 47 C.F.R. Part 27, Subpart G.

[3] *Initial Comments of Philips Medical Systems,* at 5–6.

[4] 47 C.F.R. § 27.601(d)(1).

[5] *Cf. id.* § 27.601(d)(5).

[6] *Comments of Spacelabs Medical, Inc.*, at 2–3; *Initial Comments of Philips Medical Systems,* at 5 (with respect to mobile transmitters).

[7] 47 C.F.R. § 15.209(a).

3. Philips agrees with General Electric Medical Systems Information Technologies that the 150 microvolt/m field-strength limit for secondary utility telemetry within a WMTS-primary band should apply at the perimeter of a health care facility or its campus, not at an individual WMTS receiver.[8] Although even this level may create added technical challenges for WMTS operation near the perimeter of some health care facilities, these challenges may be overcome by appropriate system planning.

CONCLUSION

For the foregoing reasons, Philips Medical Systems urges the Commission to take action consistent with the comments presented herein.

Respectfully submitted,

PHILIPS MEDICAL SYSTEMS

/s/

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[8] *Initial Comments of General Electric Medical Systems Information Technologies*, at 3. This limit was proposed in the *Joint Statement of Position by the American Hospital Association Task Force on Medical Telemetry and Itron, Inc.*, *attached to Comments of Itron, Inc.*